CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

MENDHENT (+o March 1, 2012 filing STATEMENT OF ECONOMIC INTERESTS

Date Received Official Use Only

COVER PAGE Please type or print in ink. NAME OF FILER (LAST) (FIRST) (MIDDLE) 1. Office, Agency, or Court Agency Name ▶ If filing for multiple positions, list below or on an attachment. Agency: _ Position: 2. Jurisdiction of Office (Check at least one box) State ☐ Judge or Court Commissioner (Statewide Jurisdiction) ■ Multi-County ____ County of _____ Other .____ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2011, through Leaving Office: Date Left _____/___ December 31, 2011. (Check one) -or-The period covered is _______, through O The period covered is January 1, 2011, through the date of leaving office. December 31, 2011. O The period covered is _____/____ Assuming Office: Date assumed ____/___/__ the date of leaving office. Office sought, if different than Part 1: _ Candidate: Election Year ... 4. Schedule Summary ► Total number of pages including this cover page: _ Check applicable schedules or "None." Schedule A-1 - Investments - schedule attached Schedule C - Income, Loans, & Business Positions - schedule attached Schedule D - Income - Gifts - schedule attached / smerded Schedule A-2 - Investments - schedule attached Schedule B - Real Property - schedule attached Schedule E - Income - Gifts - Travel Payments - schedule attached -or-None - No reportable interests on any schedule I certify under penalty of perjury under the laws of the State of California th

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RECEIVED FAIR POLITICAL PRACTICES COMMISSION

2012 MAR -8 PM 3: 33

SCHEDULE D Income - Gifts



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CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Rethy T. Yee

	4
NAME OF SOURCE	NAME OF SOURCE
CA Toppayers Association	Cos Aprian Chamber of Commerce
ADDRESS (Blusiness Address Acceptable)	ADDRESS (Business Address Acceptable)
1215 KAPECT, Suite 1250, Savarcento, CA9581	H 2012 H Street Sovite 2027, Sourannts, CA 9581
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Fortinets/forganes advocacy	Power news odvocated.
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
1,19,11 ,30.00 food and beverage	8 17,11 :30.00 Food and beverge
* 315,11 ,20.00 Food and Severage	
	\$
► NAME OF SOURCE	▶ NAME OF SOURCE
and Day Municipal Utility District	
ADDRESS (Business Address Acceptable)	Lan Jole Soil: Lon Valley (hamber 6) Commerce PAC ADDRESS (Business Address Acceptable)
375-14 Arect, Oallard, CA 94007	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	[D] W. Lanta Clara LAveet, Lan Jose, CA 95/13
Public where with the	BUSINESS ACTIVITY, IF ANY, OF SOURCE
	former advocacy
DATE (mm/dd/yy) VALUE / DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE / DESCRIPTION OF GIFT(S)
3,1,11 : 34.32 food and baverage	8 DK, 11 s 50,00 Food and beverage
7,12,11 ,15.18 Food and beverage	\$
· \$	
► NAME OF SOURCE	▶ NAME OF SOURCE
Southern Cultarnia adison	Cal labor Center at Viversity of CA Barkeley
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2244 Warst Lrove Avenue, Esseneral, 07.91774	2521 Chiming Way Revery, CA 94720
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
alectric within	Research and education
	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
as timbs I Denote Day	•
8 A 11 s 170.00 fold sparsh James Freedy	9 20,11 & 40,00 Food and beverye
s and boverage)	
1	\$
Comments: * dorate events at which I deliver	ed a speech or partipated on a Danel
Comments:	7 ' '
	•

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CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

MAR Data Religioned

COVER PAGE

by EXECUTIVE DIRECTOR'S OFFICE STATE BOARD OF EQUALIZATION

Please type or print in-ink.		
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
<u>Yee</u>	Betty	<u> </u>
1. Office, Agency, or Court	52.7	
Agency Name		22 %
CA State Board of Equalization	Roard Member	
Division, Board, Department, District, if applicable	Your Position	
First bishict		1 250
► If filing for multiple positions, list below or on an attachment.		
	· .	主 法
Agency:	Position:	S S S
2. Jurisdiction of Office (Check at least one box)		8 0
[v] State	☐ Judge or Court Commissioner (Statev	vide Jurisdiction)
Multi-County		•
City of	·	
i ony or		
3. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2011, through	Leaving Office: Date Left/_	
December 31, 2011.	(Check one)	0044 III - 1 - 1 - 1
The period covered is, throperate the period covered is	ough O The period covered is January 1, leaving office.	2011, through the date of .
Assuming Office: Date assumed/	O The period covered is/ the date of leaving office.	, through
Candidate: Election Year Office sough	ıt, if different than Part 1:	·
1. Schedule Summary		
Check applicable schedules or "None."	Total number of pages including this cov	ver page: <u>5</u>
Schedule A-1 - Investments – schedule attached	V ,Schedule C - Income, Loans, & Business I	Positions ~ schedule attached
Schedule A-2 - Investments schedule attached	Schedule D - Income - Gifts - schedule at	
Schedule B - Real Property schedule attached	Schedule E - Income - Gifts - Travel Payr	·
-07-	•	·
None - No reportable	e interests on any schedule	
. Verification		
(c)(1)		
herein and in any attached schedules is true and complete. I acknow	ledge this is a public document	ago tro mormation somanios
I certify under penalty of perjury under the laws of the State of Co	(c)(1) $(c)(1)$ $(c)(1)$	
Date Signed Tebruary 29, 2012	Sig	
(mbnth, day, year)		(ficial.)

SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

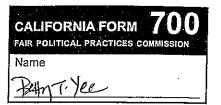
▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
East Pay Municipal Utility District	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
375 Geventh Arect Dakland, CA 94607	<u>'</u>
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public water utility	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Some served as Special Aist to General Marager	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
₹\$10,001 - \$100,000 ☐ OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership	Loan repayment Partnership
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other(Describe)	Other(Describe)
➤ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	O.D.
* You are not required to report loans from commercial ler retail installment or credit card transaction, made in the members of the public without regard to your official star	nding institutions, or any indebtedness created as part of a lender's regular course of business on terms available to tus. Personal loans and loans received not in a lender's
regular course of business must be disclosed as follows	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	% None
ADDRESS (Business Address Acceptable)	OFOLIDITY COD LOAN
	SECURITY FOR LOAN None
BUSINESS ACTIVITY, IF ANY, OF LENDER	C Notice C v anostra restraction
	Real PropertyStreet address
HIGHEST BALANCE DURING REPORTING PERIOD	Sirest address
\$500 - \$1,000	City
\$1,001 - \$10,000	_
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	(Describe)
Comments:	

SCHEDULE D Income - Gifts

CALIFORNIA FORM FAIR POLITICAL PRACTICES C	
Name	
Du Vac	

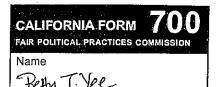
NAME OF SOURCE	► NAME OF SOURCE
CA Torogayers Association	Cal Aprian Charaber of Commerce
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1215 & Greet, Inite 1250, Sacramento, CA 9580	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Brisines/faxoner advocacy	Poweres advocacy
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
1,19,11 = 30.00 Fooders bereace	8-17-11 = 30.00 Food and beverage
* 3,15,11 \$ 30.00 Food and beverage	
► NAME OF SOURCE	► NAME OF SOURCE
Gast Bay Municipal Utility Dictrict	Lan Jace- Salicon Valley Chamber of Commerce PA
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
295-11th Award, Dalland, CA 94607 Business activity, if any, of source	101 W. Santa Clara Hareet, San Sike, CA 95113
	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public water within	Portsiners of no com
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
3,1,11 = 24.32 Food and boverage	8,25,11 , 50.00 Food AND barrage
	s
NAME OF SOURCE	NAME OF SOURCE
Lower California Edison	Cal labor lenger at University of CA Restuley ADDRESS (Business Address Acceptable)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2284 Walnut Grove Avenue, Rosenead, CA 91770	BUSINESS ACTIVITY, IDANY, OF SOURCE
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IPANY, OF SOURCE
Electric utility	ferench and education
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
P, A, 11 : 170.00 Stickets to bi Contorio Days fiesta	9,22,11 sto.00 Food and beverage
it Sonta Barbara (food)	
Comments: * - derofe events at which I delivered	a speech of ractionaled on a ravel
Comments: // // // // // // // // // // // // //	<u> </u>

SCHEDULE D Income - Gifts



NAME OF SOURCE League of CA Litils - Arian Partic James Concus ADDRESS (Business. Address Acceptable) MOD L Arect Somite ADD Lowerments, CA PROLA BUSINESS ACTIVITY, IF ANY, OF SOURCE Avocum and chuckion for city officials DATE (mm/bd/yy) VALUE DESCRIPTION OF GIFT(S) 9, 20, 11 , 20.00 Foodard beverage	NAME OF SOURCE American Kirsery Museum ADDRESS (Business Address Acceptable) DO POLY LOYECT, AT Flor, Landarisco, CARMIDE BUSINESS ACTIVITY, IF ANY, OF SOURCE Museum DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 10, 23, 11 s. Ap. 06 Food and beverage
NAME OF SOURCE Taixer & Corporair and Lultwal before ADDRESS (Business Address Acceptable) For Mant Comern Lacet Lange Fort, Language BUSINESS ACTIVITY, IF ANY, OF SOURCE Aconomic Levelopment DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 10, 5, 11 stb. DD Tood and beverage	NAME OF SOURCE A Peta lack Arrowart on ADDRESS (Business Address Acceptable) RO-9th Great, June 2160, Lacramants, CA 9580 4 BUSINESS ACTIVITY, IF ANY, OF SOURCE Advicacy for vetriller's DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) **11, 1, 11 s 198.96 Food and beverage
NAME OF SOURCE An haison ADDRESS (Business Address Acceptable) BE D Chipper brive, Fed mont, CA 94002 BUSINESS ACTIVITY, IF ANY, OF SOURCE Solw every DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) ** 10, 10, 11 s 50.00 Food and bevery Solvery Comments: ** - denotes events of which I delive	NAME OF SOURCE Aprian Burners Acceptable) ADDRESS (Business Address Acceptable) Blo 75 Puffin Road Amte 3005, San Dicgo, CA 92127 BUSINESS ACTIVITY, IF ANY, OF SOURCE Durings advocan and education DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) Tiket to Annuf Aprils JI, IT, II & JK. DD Source Land Joine (food and severy) Source And Joine (food and severy)

SCHEDULE D Income - Gifts



► NAME OF SOURCE	► NAME OF SOURCE
Historias Disanized for Political Ravel ty (HOPE) ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
624 Land Lapring Careet, Laite 020, Jas Angolos, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE 76614	BUSINESS ACTIVITY, IF ANY, OF SOURCE
leadership development and education	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
12 1,11 s 250.00 Award Dine found	
\$	\$
	\$
► NAME OF SOURCE	► NAME OF SOURCE
CA Alliance of Toxopayer Advocales	
AUDINESS Auditess Acceptable)	ADDRESS (Business Address Acceptable)
ASS Capito Mall, Lawle LOO, Lacramento, UN 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional forpresentation	DATE AND A VALUE OF STREET
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
* 12, 11, 11 , 380.00 Food, beverage, and ladging	\$
* 12,12,11 s 40.00 Food and beverage	
\$	\$
► NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
\$	
\$	
and the second of the second o	
comments: * - deroks events at which I delivered a	speech or Tarticipated on a panel
	,